Community Policing Development Application Packet

Please answer all of the following questions completely, and type all answers.

I. Project Description

- Provide an executive summary and a detailed project description. If applicable, please include a discussion of any requirements detailed in a request for proposals and how this project will advance community policing/assist other agencies in advancing community policing. The project description should not exceed 25 double-spaced pages and must include the following information:
 - 1. An explanation of the specific public safety need that this project will address.
 - 2. An explanation of why your agency is unable to address this public safety need without Federal assistance.
 - 3. Identification of any plans for continuing the project through community support following the conclusion of Federal support, if awarded.
- If applicable, please describe how your agency will engage the community throughout the project.
- Provide a detailed implementation plan that outlines project goals and objectives.
 Please include a project timeline.

II. Law Enforcement Executive/Program Official Information

(Please complete the following information about the Law Enforcement Executive (for law enforcement agencies) or Program Official (for non-law enforcement agencies) with the authority to apply for this grant on behalf of the applicant agency. If the grant is awarded, this position would be responsible for the programmatic implementation of the award.)

Applicant's Legal Name:		
Applicant's EIN Number (9-d	igit # assigned by the IRS):	
Applicant Executive's Name:		
Title:		
Applicant's Address:		
City:	State:	Zip Code:
Telephone:	Fax:	
Federal Congressional District	t(s) (Numher):	

The total amount of Federal fu	unds requested under this prop	posal: \$
Population of jurisdiction of p	orimary applicant:	
The Primary Applicant's Fisca	al Year: From:/	/ To: / /
The Primary Applicant's Federal A Federal Cognizant Agency, receives the most Federal fund previously designated by the Company of the Compan	generally, is the Federal age ding. Your Federal Cognizan	ncy from which your jurisdiction at Agency also may have been
Is the primary applicant delinque (IF YES, PLEASE EXPLAIN O		□ Yes □ No
Anticipated Program Start Da	te: End Dat	e:
Application Contact Person/Pr	roject Manager:	
Telephone:	Fax:	
E-mail:		
this position would be respons Government Executive OR Financial Official's Name:	sibie for the financial aspects	of the awara.)
Title:		
Address:		
City:	State:	Zip Code:
Telephone:	Fax:	
Type of Agency: ☐ State Police/Highway Patro	ol, Local, Tribal Government	Agency
☐ Institution of Higher Educa	ation	
☐ Non-profit Organization		
☐ Profit Organization		
☐ Other (Please specify)		

False statements or claims made in connection with COPS grants may result in fines, imprisonment, debarment from participating in federal grants or contracts, and/or any other remedy available by law.

I certify that the information provided on this form is true and accurate to the best of my knowledge.

V. Signature(s):

Signature of the Law Enforcement Executive or Program Official with the authority to apply for this grant on behalf of the applicant agency

Date:

Signature of the Government Executive or Financial Official with the authority to apply for this grant on behalf of the applicant agency

Date:

VI. Budget (your agency must address the following two items):

Items requested must be in addition to items already funded in your agency's budget. In other words, COPS funds cannot be used to pay for any item for which your agency has already budgeted.

- 1. Submit an itemized budget that lists the items your agency will request. A Budget Detail Worksheet is attached, in addition to general budget guidelines.
 - Indirect Costs are allowed only if the applicant has a Federally approved indirect cost rate. A copy of the rate approval (fully executed, negotiated agreement) must be attached.
 - If fringe benefits are being requested, please provide a detailed breakdown of the items that are included in the applicant's fringe benefit percentage rate.
- 2. Submit a budget narrative. Provide a brief, but detailed, description of the items requested and how these items relate to the project goals and objectives.

VII. Addenda

- Assurances (please sign and return)
- Certifications (please sign and return)
- Disclosure of Lobbying Activities (please sign and return if applicable)

Please be advised that a hold may be placed on this application if it is deemed that the applicant agency is not in compliance with federal civil rights laws and/or is not cooperating with an ongoing federal civil rights investigation.

VIII. Return Address

Project descriptions should be no longer than 25 double-spaced pages, not including resumes and budget detail workshops. **Submit one original and three copies to:**

U.S. Department of Justice Office of Community Oriented Policing Services (COPS) 1100 Vermont Avenue, NW Washington, DC 20530 Attn: Angel Winters

For Overnight/Express deliveries, please substitute the zip code 20005.

Paperwork Reduction Act Notice

The public reporting burden for this collection of information is estimated to average 8 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the application. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Community Oriented Policing Services, U.S. Department of Justice, 1100 Vermont Avenue N.W. Washington, DC 20530; and to the Public Use Reports Project, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.